REMARKS

Claims 1-29 are pending. Claims 1 and 22 are amended. New claim 30 is added

Claims 1-7, 9-20, and 22-29 stand rejected under 35 U.S.C.§ 102(b) as being anticipated by Heil et al. (WO 99/53993, hereinafter "Heil"). Claim 1 includes "a physiological sensor adapted to function in a high flow region of a circulatory system coupled to the distal portion of the lead body, the sensor positioned along the distal portion of the lead body such that the sensor is located in a high flow region of the right ventricle when the fixation element couples the lead to the endocardial surface." Heil discloses an endocardial lead system that includes a first defibrillation coil at or near the distal end of the lead and a first pacing/sensing electrode spaced longitudinally along the peripheral surface from the first defibrillation coil. The Examiner asserts that Heil discloses the claimed invention based upon Figures 5 and 12 of Heil. In Figures 5 and 12, a pace/sense electrode 42 is shown positioned along the septal wall of the right ventricle (p. 11, lines 11-12). Heil discloses that pacing/sensing electrode 42 is positioned to engage the tissue of the heart 28 (p. 16, line 21). Heil does not disclose, teach or suggest positioning a sensor in a high flow region of the right ventricle, as stated in the present claims. Heil merely discloses a pacing/sensing electrode, which does not operate in a high flow region of a circulatory system and is intended for engaging the tissue of a heart. Furthermore, Heil does not teach a sensor positioned in a high flow region based upon a properly construed definition of "sensor" or similar terminology as used in the specification and claims.

With regard to claim 29, the Examiner asserts that it is "inherent" that the stylus taught by Heil would position and shape the lead in the manner as described by the Applicant. The Applicant respectfully traverses. While the use of a stylet in and of itself for positioning a lead is not new, the use of a stylet in the manner described by the Applicant for positioning a lead is distinguishable from the cited art. As discussed above, Heil fails to teach positioning of a lead in

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the manner described by the Applicant (a sensor positioned in a high flow region). As such, the stylus taught by Heil would not inherently position the lead as specified in the present claims.

The rejections presented under 35 U.S.C. §103(a) are likewise unsupported and the additional reference cited fails to remedy the deficiency relating to "a physiological sensor adapted to function in a high flow region of a circulatory system coupled to the distal portion of the lead body, the sensor positioned along the distal portion of the lead body such that the sensor is located in a high flow region of the right ventricle when the fixation element couples the lead to the endocardial surface." Withdrawal of the instant rejections and issuance of a Notice of Allowance is respectfully requested.

	Respectfully submitted,
June 23, 2006	/Carol F. Barry/
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